

☐ BUSINESS
☐ RESIDENTIAL

CITY OF WESLACO
BURGLARY & ROBBERY ALARM PERMIT
APPLICATION

☐ NEW
☐ RENEWAL

DATE: _____ APPLICANT NAME: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____ PH. NO. AT ALARM LOCATION: _____

ALARM INFO.

ALARM COMPANY: _____

PHONE NUMBER: _____ MAILING ADDRESS: _____

****EMERGENCY NOTIFICATIONS:**

LIST THE NAMES, ADDRESSES AND TELEPHONE NUMBERS OF THREE (3) PEOPLE TO BE CONTACTED IN CASE OF AN EMERGENCY AT THE ABOVE LOCATION, IN THE ORDER THAT THEY ARE TO BE CONTACTED.

NAME	ADDRESS	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

This application is for your alarm permit. A fee of \$25.00 must be submitted with this form to the Weslaco Police Department at 901 North Airport Drive, Weslaco, Texas 78596. If you no longer have an alarm system, please contact the Records division at 968-8591 so that our information and documents can be corrected and updated. Weslaco City Ordinance Article V. Sec. 82-135, states that any person who operates an alarm system in violation of this Article shall be subject to a fine of not less than **TWO HUNDRED DOLLARS** (\$200.00) and not more than FIVE HUNDRED DOLLARS (500.00). Each day of such operation shall constitute separate violation.

(*Reference to Weslaco City Ordinance | Article V. "Burglar and Fire Alarm Systems")

PLEASE PLACE YOUR INITIALS AFTER EACH OF THE FOLLOWING:

_____ DOES APPLICANT UNDERSTAND WE WILL NOT BE LIABLE FOR MAL-FUNCTIONS OF ANY EQUIPMENT USED FOR DETECTION AND SIGNALING OF ANY ALARM?

_____ DOES APPLICANT UNDERSTAND THAT MORE THAN THREE (3) FALSE ALARMS IN TWELVE (12) MONTH PERIOD WILL BE SUBJECT HIM/HER TO A FALSE ALARM RESPONSE FEE OF \$50.00 EACH SUCCEEDING FALSE ALARM?

_____ DOES APPLICANT UNDERSTAND THAT HE/SHE IS RESPONSIBLE FOR UPDATES OF ALL LISTED NAMES AND PHONE NUMBERS?

_____ DOES APPLICANT UNDERSTAND THAT 10 FALSE ALARMS IN 12 MONTH PERIOD MAY RESULT IN A REVOCATION OR PERMIT?

***FAILURE TO COMPLY WITH ALL OF THE ABOVE WILL RESULT IN THE CANCELLATION OF THE PERMIT AND VIOLATION OF THE CITY ORDINANCE. ***

SIGNATURE: _____ DATE: _____

FOR OFFICIAL USE ONLY

ADMIN. PERSONNEL _____ DATE _____

FEE PAID _____ CASH/CHECK _____ RECEIPT # _____

PERMIT # _____ NEW/RENEWAL _____ BUSS./RESID. _____